

## What is ACSA?

The Royal College of Anaesthetists' (**RCoA**) Anaesthesia Clinical Services Accreditation (**ACSA**) service is a voluntary scheme for NHS and independent sector organisations that offers quality improvement through peer review.

The scheme reviews departments against the ACSA standards. These standards are based on the RCoA's "Guidelines for the Provision of Anaesthetic Services" (GPAS).

Departments self-assess against these standards, and when they feel ready to, they will book in a peer review in which a team of senior anaesthetists from external Trusts, a lay reviewer and a member of the RCoA Clinical Quality team will review your department during a multiple day visit.

The aims of the scheme are to improve the overall quality of, and reduce variation between, services provided in different localities, to encourage quality improvement by recognising those that meet high standards and to share best practice more widely.



## What does the review visit look like?

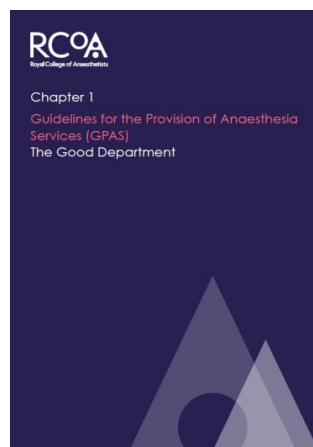
The ACSA review visit features:

- Staff sessions – interviews with staff in the anaesthetic team (including consultants and autonomously practicing anaesthetists, CD & managers, senior nurses and anaesthetists in training and anaesthetists requiring supervision)
- Review of policies that have been submitted as evidence
- Onsite visit of clinical areas – tour of all areas in which anaesthesia is delivered

## What happens after the review?

After the ACSA review, the ACSA review team will write a report to the ACSA Committee, outlining their findings and recommendations, which will be given to your department.

It is usual in the ACSA scheme that your department will need to submit further evidence to demonstrate that changes have been made following the recommendations of the review team. Once the committee have received sufficient evidence that your department is compliant with 100% of the Priority 1 ACSA standards, accreditation will be awarded.



## How have departments benefitted from ACSA before?

- Recruitment of additional staffing (e.g. pain nurses/consultants, consultants for obstetrics and preoperative assessment, and administrative staff)
- Additional PA and Job Planned time based on ACSA recommendations
- Equipment and facilities (including additional difficult airway trolleys, cell salvage machines, capnography equipment, ultrasound machines, private office space)
- Access to further training
- New pathways e.g. for post-procedural review

## What do departments say?

*Every member of our department is delighted to have the quality of care we provide recognised by ACSA. The experience has been very fulfilling; it has fostered a cohesive willingness to reflect and evidence the effort we go to deliver the best experience for patients and colleagues alike.*